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CONFIRMATION NO. 8359

<b>SERIAL NUMBER</b> 10/646,348	<b>FILING OR 371(c) DATE</b> 08/22/2003 <b>RULE</b>	<b>CLASS</b> 546	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> 05-314-C
<b>APPLICANTS</b> Rajinder Singh, Belmont, CA; Dane Goff, Redwood City, CA; John Partridge, Chapel Hill, NC; HenryH. LU, Foster City,, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/405,467 08/23/2002 and claims benefit of 60/417,837 10/11/2002 and claims benefit of 60/471,373 05/15/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 11/19/2003				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>Hand</i> Initials <i>mgd</i>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 84	<b>TOTAL CLAIMS</b> 58
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 020306				
<b>TITLE</b> Pyridyl substituted heterocycles useful for treating or preventing HCV infection				
<b>FILING FEE RECEIVED</b> 6919	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	